

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00569905 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name of Payee SAVANNA COMMUNICATIONS, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>16</div> <div>2015</div> </div>		
Mailing Address 755 SONNE DRIVE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">36000.00</div>		
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : SE24.1053 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>16</div> <div>2015</div> </div>		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>			
Name of Federal Candidate DR. BEN CARSON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">298236.40</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee SAVANNA COMMUNICATIONS, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>16</div> <div>2015</div> </div>		
Mailing Address 755 SONNE DRIVE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7466.66</div>		
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : SE24.1054 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>16</div> <div>2015</div> </div>		
Purpose of Expenditure SOCIAL MEDIA ADVERTISING		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>			
Name of Federal Candidate DR. BEN CARSON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">305703.06</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">43466.66</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee SAVANNA COMMUNICATIONS, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 755 SONNE DRIVE		Amount 7466.67	
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : SE24.1055
Purpose of Expenditure SOCIAL MEDIA ADVERTISEMENTS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 16 / 2015
Name of Federal Candidate DR. BEN CARSON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 313169.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee SAVANNA COMMUNICATIONS, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 755 SONNE DRIVE		Amount 7466.67	
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : SE24.1056
Purpose of Expenditure SOCIAL MEDIA ADVERTISEMENTS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 16 / 2015
Name of Federal Candidate DR. BEN CARSON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 320636.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	14933.34
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Robert Frank

[Electronically Filed]

Date

MM / DD / YYYY
11 / 18 / 2015

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee SAVANNA COMMUNICATIONS, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 755 SONNE DRIVE		Amount 50000.00	
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : SE24.1057
Purpose of Expenditure TELEVISION ADVERTISING	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 16 / 2015	
Name of Federal Candidate DR. BEN CARSON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: ZZ	
Calendar Year-To-Date Per Election for Office Sought 370636.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Robert Frank

[Electronically Filed]

Date

MM / DD / YYYY
11 / 18 / 2015

Signature

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Form/Schedule: SE
Transaction ID : SE24.1057

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states.

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